JUL 10 2006

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FACSIMILE COVER SHEET

то:	U.S. Patent & Trademark Office Central Facsimile		
FROM:	Frank L. Cire (Reg. No.: 42,419)	
RE:	U.S. Application No. 09/977,31 Attn: Examiner C. Larose Group Art Unit 2624 Atty. Docket No. 03500.015887		
FAX NO.:	(571) 273-8300		
DATE:	July 10, 2006	NO. OF PAGES: (including cover page)	10
TIME: 3	:25 pm	SENT BY:	Dawn M.

MESSAGE

Transmitted herewith is an Amendment and an Amendment Transmittal in response to the Office Action dated April 10, 2006.

1 hereby certify that this correspondence is being faesimile transmitted to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

July 10, 2006 (Date of Transmission)

Frank L. Cire (Reg. No. 42,419)
(Name of Attorney for Applicant)

Signature Date of Signature

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JUL 10 2006

In re Application of:

Docket No. 03500.015887.

YASUO FUKUDA

Examiner: C. Larose

Application No.: 09/977,318

Group Art Unit: 2624

Filed: October 16, 2001

Date: July 10, 2006

For: IMAGE PROCESSING METHOD, APPARATUS THEREFOR AND STORING MEDIUM

Mail Stop Amendment COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional claims fee is required.

The fee has been calculated as shown below

		C	LAIMS AS AMEN	IDED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 5	MINUS	** 39	= 0	x \$25 \$50	-0-
INDEP. CLAIMS	* 3	MINUS	***	= 0	x \$100 \$200	-0-
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—					-0-	

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

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July 10, 2006 (Date of Transmission)

Trank L. Cire (Reg. No. 42,419) (Name of Attorney for Applicant)

July 10, 2006
Signature Date of Signature

	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Frank L. Cire
	Attorney for Applicant
	Registration No.: 42,419

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200 Form #120

CA_MAIN 115994V1

JUL 10 2006

03500.015887.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re A	pplication of:)	
		:	Examiner: C. Larose
YASUO FUKUDA			
		:	Group Art Unit: 2624
Application No.: 09/977,318)	
		:	
Filed:	October 16, 2001)	
		:	
For:	IMAGE PROCESSING METHOD,)	
	APPARATUS THEREFOR AND	:	
	STORING MEDIUM)	July 10, 2006

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated April 10, 2006, please amend the above-identified application as follows.

I hereby certify that this correspondence is being fluctimile transmitted to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

July 10, 2006 (Date of Transmission)

rank L. Cire (Reg. No. 42,419)
(Name of Attorney for Applicant)

Date of Signature